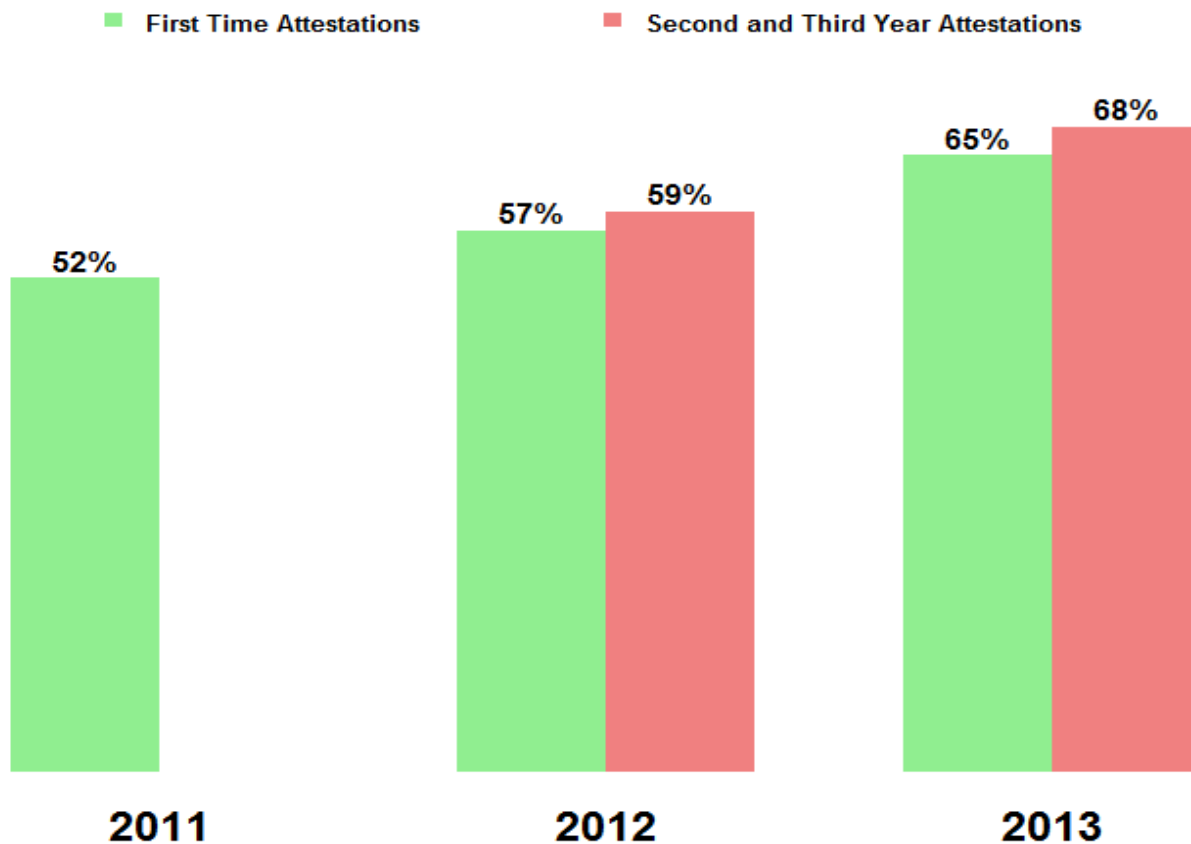


Health IT Quick-Stat #28

Majority of Primary Care Physicians Able to Submit Electronic Immunization Data to Local Public Health Agencies

2011 – 2013

Percent of Primary Care Physicians Selecting Immunization Menu Measure without Exclusion



Meaningful Use Payment Year	Percent Selecting Immunization Measure without Exclusion	
	First Time Attesters	Second and Third Year Attesters
2011	52%	--
2012	57%	59%
2013	65%	68%

Summary:

Approximately 7 out of 10 primary care physicians eligible for the Medicare EHR Incentive Program selected the Immunization Meaningful Use Menu measure without exclusion in 2013. 65 percent of 2013 first time attestors selected this measure without exclusion, up from 52 percent of 2011 first time attestors. In addition, primary care physicians attesting for the second or third time select this measure at a higher rate than first time attestors: 59 percent in 2012 and 68 percent in 2013.

Source:

[1] Medicare EHR Incentive Program data as of February 28, 2014.

[2] American Medical Association physician specialty data.

Notes:

[1] Providers may start in the Centers for Medicare and Medicaid Services EHR Incentive program at any time. In the first year of program participation, providers attest to performance over a 90-day reporting period. Providers attest to second and third year participation over a full calendar year reporting period.

[2] Primary care physicians: physicians with specialties in pediatrics, gynecology, obstetrics, geriatrics, family medicine, and internal medicine.

[3] In Meaningful Use Stage 1, eligible providers must select one of two public health menu measures. Menu Measure no.9 reflects the provider's capability to submit electronic data to immunization registries or immunization information systems. To meet this measure for Stage 1, providers must perform at least one test of their certified EHR technology's capacity to submit data to the local jurisdiction's immunization registry. If the test is successful and subsequent submissions are permitted by the registry, the provider must then send follow-up submissions.

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